

ZONING ORDINANCE TEXT AMENDMENT APPLICATION

CITY OF TROY

CITY OF TROY PLANNING DEPARTMENT
500 W. BIG BEAVER
TROY, MICHIGAN 48084
248-524-3364
FAX: 248-524-1838
E-MAIL: planning @ ci.troy.mi.us



FILE NUMBER _____

DATE FILED _____

ZOTA REQUEST FEE (\$1000.00) _____

NOTICE TO THE APPLICANT

REGULAR MEETINGS OF THE TROY CITY PLANNING COMMISSION ARE HELD ON THE SECOND TUESDAY OF EACH MONTH AT 7:30 P.M. AT THE CITY HALL. APPLICATIONS FOR **ZONING ORDINANCE TEXT AMENDMENTS** SHALL BE FILED NOT LATER THAN THIRTY (30) DAYS BEFORE THE SCHEDULED DATE OF THE MEETING. THE PROCEDURE TO BE FOLLOWED SHALL BE SIMILAR TO THAT INDICATED IN SECTION 03.21.00 OF THE ZONING ORDINANCE RELATIVE TO THE REZONING OF PROPERTY.

PLEASE FILE TWO (2) ORIGINALS

AN APPLICATION FEE OF **\$1000.00** PER REQUEST SHALL BE SUBMITTED. A \$100.00 PORTION OF THIS FEE SHALL BE REFUNDED TO THE APPLICANT IF A PUBLIC HEARING IS NOT HELD BY THE CITY COUNCIL REGARDING SAID APPLICATION.

TO THE CITY COUNCIL:

I (WE), THE UNDERSIGNED, DO HEREBY RESPECTFULLY PETITION AND MAKE APPLICATION TO THE TROY CITY COUNCIL TO AMEND THE CITY OF TROY ZONING ORDINANCE TEXT AS HEREINAFTER REQUESTED, AND IN SUPPORT OF THIS APPLICATION, THE FOLLOWING FACTS ARE SHOWN:

APPLICANT FOR ZONING ORDINANCE TEXT AMENDMENT:

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ FAX _____

ORDINANCE SECTIONS:

I (WE) WISH TO PROPOSE THAT THE FOLLOWING SECTION(S) OF THE ORDINANCE BE AMENDED:

I (WE) PROPOSE THAT THE TEXT BE REVISED TO ACCOMPLISH THE FOLLOWING PURPOSE(S) AND/OR TO READ AS FOLLOWS:(attach additional sheets if necessary)

SIGNATURE OF THE APPLICANT: _____ DATE: _____